

JUDICIAL SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

3757

FORM JSPAC COVER SHEET PG 1

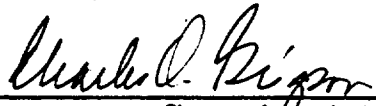


The JSPAC Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission files)	2 Total pages filed 6
3 COMMITTEE NAME FRIENDS OF JUDGE DAVID CRAIN		OFFICE USE ONLY	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE c/o Charles O. Grigson 604 W. 12th Street Austin, Texas 78701		DATA COUNTY CLERK TRAVIS COUNTY TEXAS JAN 15 4 42 PM '98 FILED Jan. 15, 1998
5 CAMPAIGN TREASURER NAME	TITLE FIRST MI Charles O. Grigson NICKNAME LAST SUFFIX		
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE) APT / SUITE # CITY STATE ZIP CODE 604 W. 12th Street Austin, Texas 78701 1		
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input checked="" type="checkbox"/> Same as Above <input checked="" type="checkbox"/> Change of Address (from Form STA)	STREET OR PO BOX APT / SUITE # CITY STATE ZIP CODE 604 W. 12th Street Austin, Texas 78701		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 477-5791		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Dissolution (attach JSPAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year 7 / 1 / 97 THROUGH 12 / 31 / 97		
11 ELECTION	ELECTION DATE Month Day Year 3 / / 98 ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		

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SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAU

PG 2

11 COMMITTEE NAME FRIENDS OF JUDGE DAVID CRAIN		12 ACCOUNT #	
13 SPECIFIC COMMITTEE PURPOSE <input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE <input type="checkbox"/> ASSIST <small>(officeholders only)</small>	<input checked="" type="checkbox"/> CANDIDATE <input checked="" type="checkbox"/> OFFICE-HOLDER	CANDIDATE / OFFICEHOLDER NAME David F. Crain OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Judge, County Court at Law No. 3, Travis County, Texas	
	<input type="checkbox"/> MEASURE <input type="checkbox"/> Identified <input type="checkbox"/> Unidentified	BALLOT IDENTIFICATION / # ELECTION DATE Month 3 / Day / Year 98	
		DESCRIPTION	
	14 NO REPORTABLE ACTIVITY <input type="checkbox"/> Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only)		
15 CONTRIBUTION AND LOAN TOTALS EXPENDITURE TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 500.00
	3. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$
	4. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED		\$
	5. TOTAL POLITICAL EXPENDITURES		\$ 1,450.00
16 AFFIDAVIT I swear, or affirm, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. <div style="text-align: right;">  Signature of campaign treasurer </div> AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said <u>Charles D. Gussner</u> this the <u>14th</u> day of <u>JAN.</u> 19 <u>2001</u> , to certify which, witness my hand and seal of office. <div style="display: flex; justify-content: space-between;"> <div>  Signature of officer administering oath </div> <div> Gwynn Carter Clark Print name of officer administering oath </div> <div>  Title of officer administering oath </div> </div> ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A(J)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A(J): 1	
2 FILER NAME Friends of Judge David Crain		3 ACCOUNT # (Ethics Commission filers)	
4 Date 8/27/98	5 Full name of contributor Ned Granger <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 605 W. 10th Street Austin, Texas 78701			
9 Contributor's principal occupation attorney		10 Contributor's job title	
11 Contributor's employer/law firm self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code		
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code		
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, parents' law firm(s) (if any)			

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



PLEDGED CONTRIBUTIONS (JUDICIAL)**SCHEDULE B(J)**

The INSTRUCTION GUIDE explains how to complete this form.			1 Total pages Schedule B(J):	
2 FILER NAME			3 ACCOUNT # (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED PLEDGES: ⇐ ⇐ ⇐ ⇐ ⇐ ⇐ \$				
5 Date	6 Full name of pledgor <input type="checkbox"/> out of state PAC 7 Pledgor address, City: State: Zip Code	8 Amount of pledge (\$)	9 In-kind description (if applicable)	
10 Pledgor's principal occupation		11 Pledgor's job title		
12 Pledgor's employer/law firm		13 Law firm of pledgor's spouse (if any)		
14 If pledgor is a child, law firm of parent(s) (if any)				
Date	Full name of pledgor <input type="checkbox"/> out of state PAC Pledgor address, City: State: Zip Code	Amount of pledge (\$)	In-kind description (if applicable)	
Pledgor's principal occupation		Pledgor's job title		
Pledgor's employer/law firm		Law firm of pledgor's spouse (if any)		
If pledgor is a child, law firm of parent(s) (if any)				
Date	Full name of pledgor <input type="checkbox"/> out of state PAC Pledgor address, City: State: Zip Code	Amount of pledge (\$)	In-kind contribution description (if applicable)	
Pledgor's principal occupation		Pledgor's job title		
Pledgor's employer/law firm		Law firm of pledgor's spouse (if any)		
If pledgor is a child, law firm of parent(s) (if any)				

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LOANS (JUDICIAL)**SCHEDULE E(J)**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule E(J): 1	
2 FILER NAME		3 ACCOUNT # (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED LOANS: ⇄ ⇄ ⇄ ⇄ ⇄ ⇄ \$			
5 Date of loan	7 Name of lender <input type="checkbox"/> out of state PAC		9 Loan Amount (\$)
6 Is lender a financial institution? Y N	8 Lender address, City, State, Zip Code		10 Interest rate
			11 Maturity date
12 Lender's Principal Occupation		13 Lender's Job Title	
14 Lender's Employer/Law Firm		15 Law Firm of lender's spouse (if any)	
16 If lender is child, law firm of parent(s) (if any)			
17 Description of Collateral <input type="checkbox"/> none			
18 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	19 Name of guarantor		21 Amount Guaranteed (\$)
	20 Guarantor address: City, State, Zip Code		
22 Guarantor's Principal Occupation		23 Guarantor's Job Title	
24 Guarantor's Employer/Law Firm		25 Law Firm of guarantor's spouse (if any)	
26 If guarantor is child, law firm of parent(s) (if any)			

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If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 1
2 FILER NAME Friends of Judge David Crain		3 ACCOUNT # (Ethics Commission filers)
4 Date 9/23/97	5 Payee name Travis County Democratic Party 6 Payee address: City: State: Zip Code 505 West Lynn Austin, Texas 78703	7 Amount (\$) \$250.00
8 Purpose of expenditure Contribution to Democratic Party		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date 12/22/97	Payee name Travis County Democratic Party Payee address: City: State: Zip Code 505 West Lynn Austin, Texas 78701	Amount (\$) \$1,200.00
Purpose of expenditure Filing fee		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name David F. Crain Office sought / held Judge, County Court at Law No. 3, Travis County, Texas
Date	Payee name Payee address: City: State: Zip Code	Amount (\$)
Purpose of expenditure		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date	Payee name Payee address: City: State: Zip Code	Amount (\$)
Purpose of expenditure		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
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